PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

F

| Lampilomiolia mil | c 1 111 1 6 | C | HIC EEE and DUDLICAT | ION FEE (if room | rod) Blocks I through 5 s | hould be completed where |
|--|---|---|---|--|---|---|
| ppropriate. All further on the confected unless corrected to the confected | correspondence includir d below or directed oth | or transmitting the 188 ig the Patent, advance ierwise in Block 1, by | orders and notification of a (a) specifying a new corre | maintenance fees w spondence address; | red). Blocks I through 3 s vill be mailed to the current and/or (b) indicating a sep | correspondence address as arate "FEE ADDRESS" for |
| CORREST CORREST ONDERFOR ADDITION OF BILDER 1 for any straings of analysis | | | | (s) Transmittal. Thi | mailing can only be used for s certificate cannot be used I paper, such as an assignme of mailing or transmission. | for any other accompanying |
| | 7590 11/08 | /2007 | | tificate of Mailing or Trans | | |
| Kari H. Bartingale SHUMAKER & SIEFFERT, P.A. 8425 Seasons Parkway | | | | ereby certify that the tes Postal Service we ressed to the Mail asmitted to the USP | is Fec(s) Transmittal is bein vith sufficient postage for fir Stop ISSUE FEE address FO (571) 273-2885, on the c | g deposited with the United st class mail in an envelope above, or being facsimile late indicated below. |
| Suite 105 St. Paul, MN 55125 | | | | (Depositor's name) | | |
| St. Faul, Mily 33123 | | | | (Signature) | | |
| •• | | | | | | (Date) |
| APPLICATION NO. FILING DATE | | | FIRST NAMED INVENTOR | | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
| 10/698,095 10/31/2003 | | | William J. Bertrand | | P-11490.00 | 1017 |
| TITLE OF INVENTION: ELECTRONIC VALVE READER | | | | | | |
| | | | | | | |
| | | | | · | | |
| APPLN. TYPE | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE DUE | PREV. PAID ISSUI | | |
| nonprovisional | NO | \$1440 | \$300 | \$ 0 | \$1740 | 02/08/2008 |
| EXAMINER ART UNIT | | | CLASS-SUBCLASS |] | | |
| GILBERT, SAMUEL G 3735 | | | 128-898000 | | • | |
| CFR 1.363). Change of corresponderess form PTO/SI "Fee Address" ind | ence address or indication ondence address (or Cha 3/122) attached. ication (or "Fee Address 2 or more recent) attact | ange of Correspondence | 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered patent attorneys or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. | | | |
| ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) | | | | | | |
| PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. | | | | | | |
| (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTY | | | | | | |
| MEDTRONIC, INC. Minneapolis, Minnesota, USA | | | | | | |
| Please check the appropriate assignce category or categories (will not be printed on the patent): 🔲 Individual 🗵 Corporation or other private group entity 🚨 Government | | | | | | |
| 4a, The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) | | | | | | |
| Issue Fee | | | A check is enclosed. | | | |
| Publication Fee (No small entity discount permitted) Advance Order - # of Copies | | | Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any | | | |
| | | | overpayment, to Dep | osit Account Numb | cr <u>500471</u> (enclose | an extra copy of this form). |
| a. Applicant claim | tus (from status indicate s SMALL ENTITY stat | tus. See 37 CFR 1.27. | | | LL ENTITY status. Sec 37 (| |
| NOTE: The Issue Fee an interest as shown by the | d Publication Fee (if rec records of the United St | quired) will not be accep ates Ratent and Tradema | ited from anyone other than irk Office. | the applicant; a reg | istered attorney or agent; or | the assignce or other party in |
| Authorized Signature | INAM | | | Date | ecember 27, 200 | 7 |
| Typed or printed nam | | zaja | Registration No. 39,649 . | | | |
| This collection of information is required by CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. | | | | | | |

Box 1450, Alexandria, Virginia 22 Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.